

NATIONAL LIBRARY OF MEDICINE
Washington



Founded 1836

U. S. Department of Health, Education, and Welfare
Public Health Service



✓

BOSTON MEDICAL POLICE.



BOSTON:

PRINTED BY SEWELL PHELPS,

No. 5, Court Street.

.....

1820.

*At a stated meeting of the Members of the BOSTON MEDICAL ASSOCIATION,
holden at Forster's Coffee House, March 1, 1820.*

It was voted—That Drs. SHURTLEFF, Sen., JACKSON and BIGELOW, be a Committee to revise and arrange the Rules and Regulations of this Association, and report at an adjourned meeting to be held on the first Wednesday of April.

At the adjourned meeting, holden at the Massachusetts Medical College, Wednesday, April 5, 1820.

The Committee reported ; and

It was voted—That their Report be accepted, and that the Secretary be directed to have printed 200 copies of the Rules and Regulations of the Association, as amended, together with the Medical Police, and a List of Members.

Voted—That the next stated meeting of this Association shall be held at the Massachusetts Medical College, on the first Monday of May, 1823, at 3 o'clock, P. M.

Attest,

JOHN WARE, *Secretary.*

BOSTON MEDICAL POLICE.

THE Standing Committee of the Association of Boston Physicians for the year, commencing on the first Wednesday of March, 1807, having been instructed to propose a code of Medical Police, to be submitted to the consideration of the Association at their next annual meeting, beg leave to report :

1. That having examined the different publications of Gregory, Rush and Percival upon this subject, they first selected from them such articles, as seemed most applicable to the circumstances of the profession in this place.

2. That with these articles as a ground work, they have proceeded to form a short system of police, containing general principles for the government of this Association, by making such alterations, or additions to them, as they thought necessary for rendering them both practicable and useful.

3. That they have added such new articles, as they judged conducive to the general views of this Association, and adapted to the particular situation of medical practice in America.

The result of which is submitted in the form following :

CONSULTATIONS.

CONSULTATIONS should be encouraged in difficult and protracted cases, as they give rise to confidence, energy, and more enlarged views in practice. On such occasions, no rivalry or jealousy should be indulged ; candour, justice and all due respect should be exercised towards the physician who first attended ; and as *he* may be presumed to be best acquainted with the patient and his family, he should deliver all the medical directions as agreed upon. It should be the province, however, of the senior consulting physician to propose the necessary questions to the sick.

The consulting physician is never to visit without the attending one, unless by the desire of the latter, or when, as in sudden emergency, he is not to be found. No discussion of the case should take place before the patient or his friends ; and no prognostications should be delivered, which were not the result of previous deliberation and concurrence. Theoretical debates, indeed, should generally be avoided in consultation, as occasioning perplexity and loss of time ; for there may be much diversity of opinion on speculative points, with perfect agreement on those modes of practice, which are founded, not on hypothesis, but on experience and observation. Physicians in consultation, whatever may be their private sentiments or opinions of one another, should divest themselves of all partialities, and think of nothing but what

will most effectually contribute to the relief of those under their care.

If a physician cannot lay his hand to his heart and say, that his mind is perfectly open to conviction, from whatever quarter it may come, he should in honour decline the consultation.

All discussions and debates in consultations, are to be held secret and confidential.

Many advantages may arise from two consulting together, who are men of candour, and have mutual confidence in each other's honour. A remedy may occur to one, which did not to another; and a physician may want resolution or a confidence in his own opinion, to prescribe a powerful, but precarious remedy, on which, however, the life of his patient may depend; in this case, a concurrent opinion may fix his own. But when such mutual confidence is wanting, a consultation had better be declined, especially if there is reason to believe, that sentiments delivered with openness, are to be communicated abroad, or to the family concerned; and if, in consequence of this, either gentleman is to be made responsible for the event.

The utmost punctuality should be observed in consultation visits; and to avoid loss of time, it will be expedient to establish the space of *fifteen minutes*, as an allowance for delay, after which, the meeting might be considered as postponed for a new appointment.

INTERFERENCES.

Medicine is a liberal profession; the practitioners are, or ought to be, men of education; and their expectations

of business and employment should be founded on their degrees of qualification, not on *artifice* and *insinuation*. A certain undefinable species of *assiduities* and *attentions*, therefore, to families usually employing another, is to be considered as beneath the dignity of a regular practitioner, and as making a mere trade of a learned profession; and all officious interferences in cases of sickness in such families, evince a meanness of disposition, unbecoming the character of a physician or a gentleman. No meddling inquiries should be made concerning them, nor hints given relative to their nature and treatment, nor any selfish conduct pursued, that may, directly or indirectly, tend to weaken confidence in the physicians or surgeons, who have the care of them.

When a physician is called to a patient, who has been under the care of another gentleman of the faculty, before any examination of the case, he should ascertain, whether that gentleman understands that the patient is no longer under his care; and unless this be the case, the second physician is not to assume the charge of the patient, nor to give his advice, (excepting in instances of sudden attacks) without a regular consultation; and if such previously attending gentleman has been dismissed, or has voluntarily relinquished the patient, his practice should be treated with candour, and justified so far as probity and truth will permit; for the want of success in the primary treatment of the disorder, is no impeachment of professional skill and knowledge.

It frequently happens, that a physician, in incidental communications with the patients of others, or with their friends, may have their cases stated to him in so direct a manner, as not to admit of his declining to pay attention

to them. Under such circumstances, his observations should be delivered with the most delicate propriety and reserve. He should not interfere in the curative plans pursued; and should even recommend a steady adherence to them, if they appear to merit approbation.

DIFFERENCES OF PHYSICIANS.

The differences of physicians, when they end in appeals to the publick, generally hurt the contending parties; but, what is of more consequence, they discredit the profession, and expose the faculty itself to contempt and ridicule. Whenever such differences occur, as may affect the honour and dignity of the profession, and cannot immediately be terminated, or do not come under the character of violation of the special rules of the Association otherwise provided for, they should be referred to the arbitration of a sufficient number of members of the Association, according to the nature of the dispute; but, neither the subject matter of such references, nor the adjudication, should, if it can be avoided, be communicated to the publick, as they may be personally injurious to the individuals concerned, and can hardly fail to hurt the general credit of the faculty.

DISCOURAGEMENT OF QUACKERY.

The use of quack medicines should be discouraged by the faculty, as disgraceful to the profession, injurious to health, and often destructive even of life. No physician

or surgeon, therefore, should dispense a secret nostrum, whether it be his invention or exclusive property ; for if it is of real efficacy, the concealment of it is inconsistent with beneficence and professional liberality ; and, if mystery alone give it value and importance, such craft implies either disgraceful ignorance, or fraudulent avarice.

CONDUCT FOR THE SUPPORT OF THE MEDICAL CHARACTER.

The *esprit du corps* is a principle of action, founded in human nature, and, when duly regulated, is both rational and laudable. Every man, who enters into a fraternity, engages, by a tacit compact, not only to submit to the laws, but to promote the honour and interest of the association, so far as they are consistent with morality and the general good of mankind. A physician, therefore, should cautiously guard against whatever may injure the general respectability of the profession, and should avoid all contumelious representations of the faculty at large, all general charges against their selfishness or improbity, or the indulgence of an affected or jocular scepticism, concerning the efficacy and utility of the healing art.

FEES.

General rules are adopted by the faculty in every town, relative to the pecuniary acknowledgments of their patients ; and it should be deemed a point of honour to adhere to them ; and every deviation from, or evasion

of these rules, should be considered as meriting the indignation and contempt of the fraternity.

Gratuitous services to the poor are by no means prohibited; the characteristical beneficence of the profession is inconsistent with sordid views and avaricious rapacity. The poor of every description should be the objects of our peculiar care. Dr. Boerhaave used to say, they were his best patients, because God was their paymaster.

It is obvious also, that an average fee, as suited to the general rank of patients, must be an inadequate compensation from the rich, (who often require attendance not absolutely necessary) and yet too large to be expected from that class of citizens, who would feel a reluctance in calling for assistance, without making some decent and satisfactory remuneration.

EXEMPTION FROM CHARGES.

The clergymen of the town, and all members of the medical profession within it, together with their families, should be attended gratuitously; but visits should not be obtruded officiously, as such civility may give rise to embarrassments, or interfere with that choice on which confidence depends.

But distant members of the faculty, when they request attendance, should be expected at least to defray the charges of travelling; and such of the clergy from abroad, as are qualified by their fortunes or incomes, to make a reasonable remuneration for medical attendance, are not more privileged than any other order of patients.

Omission to charge, on account of the wealthy circumstances of the physician, is an injury to the profession, as it is defrauding, in a degree, the common funds for its support, when fees are dispensed with, which might justly be claimed.

VICARIOUS OFFICES.

Whenever a physician officiates for another by his desire, in consequence of sickness or absence, if for a short time only, the attendance should be performed gratuitously as to the physician, and with the utmost delicacy towards the professional character of the gentleman previously connected with the patient.

SENIORITY.

A regular and academical education furnishes the only presumptive evidence of professional ability, and is so honourable and beneficial, that it gives a just claim to pre-eminence among physicians at large, in proportion to the degree in which it may be enjoyed and improved. Nevertheless, as industry and talents may furnish exceptions to this general rule, and this method may be liable to difficulties, in the application, seniority, among practitioners of this town, should be determined by the period of publick and acknowledged practice as a physician or surgeon in the same. This arrangement being clear and obvious, is adapted to remove all grounds of dispute amongst medical gentlemen; and it secures the regular continuance of the established order of precedency,

which might otherwise be subject to troublesome interruptions, by new settlers, perhaps not long stationary in the place.

JOHN WARREN.

LEMUEL HAYWARD.

JOHN FLEET.



AT a meeting of the Boston Medical Association, held at Vila's on the first Wednesday in March, 1808, the Committee of the preceding year, having, in conformity with their instructions, reported on a code of Medical Police, which was read and accepted by sections,

IT WAS VOTED, That the Report of the Committee be recommitted, with instructions to print five hundred copies of the same, and that they present to each member of the Association three copies of the Report, and distribute the remaining copies to such other physicians of the state as they may think proper.

VOTED LIKEWISE, That the thanks of the Association be presented to the Committee for their judicious and useful Report.

J. GORHAM, *Secretary.*

THE UNIVERSITY OF CHICAGO
LIBRARY
1100 EAST 58TH STREET
CHICAGO, ILL. 60637

THE UNIVERSITY OF CHICAGO
LIBRARY
1100 EAST 58TH STREET
CHICAGO, ILL. 60637

THE UNIVERSITY OF CHICAGO
LIBRARY
1100 EAST 58TH STREET
CHICAGO, ILL. 60637

RULES AND REGULATIONS

OF THE

BOSTON MEDICAL ASSOCIATION.

BOSTON:

PRINTED BY SEWELL PHELPS,

No. 5, Court Street.

.....

1820.

THE JOURNAL OF THE
AMERICAN MEDICAL ASSOCIATION
PUBLISHED WEEKLY
CHICAGO, ILL., U.S.A.

Subscription price, Five Dollars per Annum in Advance.
Single Copies, Fifteen Cents.
Entered as Second-Class Matter, May 2, 1912.
Postpaid.

Published by the American Medical Association, 535 North Dearborn Street, Chicago, Ill.
Acceptance for mailing at special rate of postage provided for in Act of October 3, 1917.
Postage paid at Chicago, Ill.
Copyright, 1918, by American Medical Association
All rights reserved.
This journal is published weekly, except during the months of January and February, when it is published bi-weekly.
The subscription price is Five Dollars per Annum in Advance.
Single Copies, Fifteen Cents.
Entered as Second-Class Matter, May 2, 1912.
Postpaid.

Published by the American Medical Association, 535 North Dearborn Street, Chicago, Ill.
Acceptance for mailing at special rate of postage provided for in Act of October 3, 1917.
Postage paid at Chicago, Ill.
Copyright, 1918, by American Medical Association
All rights reserved.
This journal is published weekly, except during the months of January and February, when it is published bi-weekly.
The subscription price is Five Dollars per Annum in Advance.
Single Copies, Fifteen Cents.
Entered as Second-Class Matter, May 2, 1912.
Postpaid.

RULES AND REGULATIONS.

I. **THERE** shall be a stated meeting of the **BOSTON MEDICAL ASSOCIATION** once in three years; and this meeting shall be held at 3 o'clock, P. M. on the first Monday in May of those years, on which it falls. It shall be held in the Massachusetts Medical College, unless where obvious circumstances render it necessary to hold it in some other place. In such cases, it shall be left to the discretion of the Secretary to fix on any suitable publick room for the purpose.

II. At every stated meeting, there shall first be chosen a chairman to preside at the same; and then there shall be chosen by ballot a Secretary and a Standing Committee of five members, who shall continue in office until the next stated meeting, and until others are elected in their room.

III. It shall be the duty of the Secretary to keep a record of the proceedings of the Association, and of those of the Standing Committee, whose meetings he shall attend for this purpose, and to perform such other services as are pointed out in other regulations.

IV. It shall be the duty of the Standing Committee to attend to and decide on all matters, which regard the

honour or interest of the Association, especially to act upon all infringements of its regulations, which may come to their knowledge, and to call special meetings of the Association, when they judge proper. In all cases, there may be an appeal from the judgment of the Standing Committee to the Association. This Committee shall fill any vacancy in their own body, or in the office of Secretary, which may occur by death or resignation, until the next stated meeting of the Association.

V. It shall be the duty of the Secretary to call a special meeting of the Association, whenever directed so to do by the Standing Committee, and likewise whenever seven members of the Association request him in writing so to do. In the cases of both stated and special meetings, he shall send a notification, printed or written, to each member one week at least before the day of the meeting, and shall advertise the same, during the week preceding the meeting, twice in two newspapers printed in the town.

VI. No member of this Association shall consult with, or voluntarily meet in a professional way, or aid or abet any practitioner resident in this town, who is not a member of this Association.

VII. If any member becomes acquainted with the conduct of another member, which he considers as a breach of the rules and regulations of the Association, it shall be his duty to make the same known to the Standing Committee, who shall inquire into the case, and decide upon the same as they may think proper.

VIII. If a physician be called to a patient, who has usually been attended by a family physician, on the arrival of the latter the patient shall be resigned by the for-

mer. Should the latter not arrive till after the departure of the former, it shall be the duty of the latter to apprise the former, that he has taken charge of the patient.

IX. When a physician, engaged to attend a case of midwifery, is absent, and a second delivers the patient, the second shall receive the fee, and relinquish the patient to the first. If the first arrive while the second is present, and before the patient is delivered, the second shall resign the patient to the first.

X. The members of this Association shall charge for their professional services the fees in the following table, subject, however, to the several rules contained in this code relative to the same.

	D.	C.
For a visit,	1	50
For a visit and first consultation,	5	
For a visit and each subsequent do.	3	
For a visit on board a vessel at the wharf,	2	
For a visit on board a vessel in the stream, above Fort Independence,	5	
For a visit on board a vessel off or below do.	10	
For a visit out of town, for every mile from the centre of Boston,	1	50
For a visit out of town in consultation, the fee as above for a visit and consultation, with the addition for every mile except the first of	1	50
In like manner, for every other service, when out of town, the fee for the service shall first be charged, and for every mile excepting the first,	1	50
For a visit in Roxbury street, in Charlestown, or in Cam- bridgeport,	3	
For a visit and first consultation at either of the above places,	6	
For a visit and each subsequent do.	4	
For a visit and passing catheter,	5	
For a visit and passing catheter, when frequently repeat- ed, and for that purpose only,	1	50
For a visit and prescribing and performing venesection, For a visit and performing venesection only, without ad- vice,	3	
	1	50
For a visit and extracting a tooth,	1	50
For a visit and dressing only,	1	50

	D.	C.
For venesection, extracting a tooth, or dressing, at the surgeon's house,	1	
For prescription and venesection at do.	2	
For rising in the night* and visit,	8	
For rising in the night* and visit in consultation,	10	
For rising in the night* and advice at the physician's house,	3	
For advice at the physician's house, according to the } importance of the case and the time occupied . . . }	fr. 1 to 10	
For a case of gonorrhæa,	10	
For all other cases of syphilis	15	
For a case of midwifery in the day time,	15	
if any part of the attendance is in the night,*	20	
For capital operations, such as amputations of large limbs, lithotomy, trepanning and extirpation of large tumours,	40	
For the operation for fistula in ano,	20	
For tapping for dropsy, and for reducing luxations or fractures of large bones	10	
For amputations of fingers or toes, and for excision of small tumours,	8	
For reducing luxations or fractures of small bones, for stitching recent wounds, opening large abscesses, and similar operations,	5	
For vaccine inoculation,	5	

XI. The foregoing table is designed to state the regular fees, which shall be charged for the services, to which they are respectively annexed; and they are the lowest fees, which the members of this Association shall demand, with the exceptions mentioned in the following regulations. And in all cases of extraordinary detention or attendance, also, in proportion to the importance of the case and of the responsibility attached to it and to

* The night, in this table, is considered as beginning at 11 o'clock, P. M. and ending at 5 o'clock, A. M. or at sunrise, when that is later than 5 o'clock, A. M.

Whenever it is necessary to make more than three visits to women after delivery, all additional visits shall be charged as in ordinary cases.

N. B. In all the cases stated in the table, following that of midwifery, a visit is implied, yet the charge should be the same if performed at the practitioner's house.

the service rendered, where these are extraordinary, the charges shall be increased according to the judgment of the practitioner concerned; and the duty to make such increase in the charges shall be considered obligatory on the members of this Association.

XII. It shall be considered proper, but not obligatory, to charge from two to five dollars for a first visit in every case. Likewise, all visits made at a late hour in the evening shall be considered as extraordinary attendance, and may be charged accordingly.

XIII. If, in any case of midwifery, a second physician is called in consultation, both the attending and consulting physician shall charge at least the usual fee for delivery; except that, where the consulting physician in such a case pays only a consultation visit, and is not detained in attendance on the case, he may charge the fee for a consultation visit. In common cases of consultation the attending physician may charge a larger fee than for ordinary visits, provided that he does not charge more than the usual fee for consultation.

XIV. In cases of midwifery, when the child is born, but not the placenta before the arrival of the accoucheur, the whole fee is to be charged. When both the child and placenta are born before the arrival of the accoucheur, half or the whole fee is to be charged according to the circumstances. This rule is not to be applied to cases, where the delay arises from the accoucheur.

XV. It is not designed by these regulations to prevent the members of this Association from rendering their services gratuitously to persons, who are incapable of remunerating them without distressing themselves or

their families ; but, in such cases, the whole services must be gratuitous, as by charging fees for some of the services and not for all, it is obvious that the intention of the fee-table would be effectually frustrated. In any case, where the physician believes that his patient cannot afford to pay the regular fees, and yet is able to make some compensation, the following deductions may be made, viz. *three dollars* on the fee for rising in the night ; *three dollars* on the fee for a case of midwifery, in the day time, and *five dollars* on the fee for the same service in the night ; and *one third* on the fees for all other services, excepting only cases of gonorrhœa and syphilis, from which no deduction shall be made. These deductions may be made either in the original charges, or on making out the account, at the pleasure of the practitioner ; but they are not to be made after presenting an account, except where the practitioner learns, after presenting an account, that the pecuniary circumstances of his patient are not so good as he had believed them to be.

XVI. No member of this Association shall omit charging any necessary visits made on the same day, on account of their number.

XVII. No member of this Association shall make a previous contract with any family for a definite sum, as a remuneration for his annual attendance on that family.

XVIII. Those physicians of the adjoining towns, who are members of the Massachusetts Medical Society, or have been licensed by it, shall be requested to conform in their charges to the fee-bill of this Association, whenever they attend patients in this town.

XIX. When the circumstances permit, every physician shall present his account immediately after his at-

tendance in a fit of sickness. This shall be particularly attended to in cases of midwifery. In ordinary cases of attendance in families an account shall be presented every January; and it shall be an invariable custom to endeavour to settle all accounts in that month, or at least annually.

XX. In cases of consultation the consulting physician should send his bill to the attending physician, as soon as his service is completed; and it should then be the business of the attending physician to present the bill.

XXI. Printed blanks may be used of the following form:

Mr.

to

Dr.

For Medical Attendance on

XXII. The regulations of the Association shall be offered for subscription to all candidates for medical practice in this town, who have received a medical degree at Harvard University, or are Fellows of the Massachusetts Medical Society, or have received letters testimonial of approbation or of license from the Censors of said society; and the Secretary shall be charged with the execution of this regulation, with which he shall comply, in every instance, so soon as he shall learn that any candidate of the above description may have established himself in this town; or in case the Secretary has doubts, in any instance, respecting the propriety of offering the articles to any candidate above described, he shall call on the Standing Committee for advice and direction; and in case any person, to whom he offers the regulations, shall refuse or neglect to sign the same, the Secretary

shall make known such refusal or neglect to the Standing Committee.

XXIII. Every candidate, at the time of becoming a member of the Association, shall sign the following obligation, which shall be in a book deposited with the Secretary :

The undersigned approve of the Regulations of the Boston Medical Association, and agree upon their honour to comply with the same.

It shall also be his duty to transmit a circular note signed by the Secretary to every member, informing them of his admission ; and he is not to be entitled to the rights and privileges of the Association until this has been done.

XXIV. The members of this Association, after arriving at the age of sixty, shall be exempted from all assessments ; but in other particulars shall be governed by the rules and regulations of the Association.

XXV. The Secretary shall pay all expences of this Association, and, once in a year at least, and oftener when any considerable expence has been incurred, he shall assess the amount due to him upon the members of the Association, equally, with the exception stated in the 24th rule. He shall employ, at the expence of the members, a person to collect the assessments ; and if any member refuses or neglects to pay his assessment, his connection with the Association shall thereupon cease, and the Secretary shall inform the members of the same by a circular note, and the assessment left unpaid shall become a charge against the Association.

XXVI. The Secretary's records and accounts shall be subject to examination by the Standing Committee, and by the Association, when they judge proper.

XXVII. All resignations of members shall be made in writing to the Secretary, who shall immediately lay them before the Standing Committee, who shall either notify each member, or call a meeting of the Association, as they may think most proper.

Members of the Boston Medical Association.

SAMUEL DANFORTH.	ASA BUCKNAM.
ISAAC RAND.	THEODORE DEXTER.
LEMUEL HAYWARD.	WILLIAMS BRADFORD.
DAVID TOWNSEND.	JAMES MANN.
THOMAS WELSH.	ABNER PHELPS.
AARON DEXTER.	SAMUEL CLARKE.
WILLIAM SPOONER.	EDWARD H. ROBBINS.
WILLIAM INGALLS.	ZABDIEL B. ADAMS.
ASA BULLARD.	SOLOMON D. TOWNSEND.
JOHN G. COFFIN.	BENJAMIN AUSTIN.
JACOB GATES.	JOHN WARE.
JOHN DIXWELL.	DAVID OSGOOD.
JAMES JACKSON.	NATHANIEL NILES.
BENJAMIN SHURTLEFF.	SAMUEL A. SHURTLEFF.
JOHN C. WARREN.	SAMUEL HEMMENWAY.
HORACE BEAN.	ENOCH HALE.
JOHN GORHAM.	SAMUEL ADAMS.
THOMAS I. PARKER.	JOHN W. WEBSTER.
JOHN RANDALL.	EDWARD REYNOLDS.
GEORGE BATES.	JOHN S. BARTLETT.
GEORGE C. SHATTUCK.	WOODBRIDGE STRONG.
JOSHUA THOMAS.	WILLIAM SWEETSER.
JOHN B. BROWN.	JOHN JEFFRIES.
JACOB BIGELOW.	THOMAS W. PARSONS.
WALTER CHANNING.	JESSE SMITH.
PETER St. MEDARD.	GAMALIEL BRADFORD.
GEORGE HAYWARD.	JOSIAH F. FLAGG.
GEORGE PARKMAN.	SHELOMETH S. WHIPPLE.
AMOS FARNSWORTH.	JOHN LOCKE.
EZEKIEL D. CUSHING.	GEORGE B. DOANE.

Med. Hist.

WZ

270

B 7466

1820

c.1

NATIONAL LIBRARY
OF MEDICINE